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Fill in this information to	o identify your case:	
Debtor 1	Darryl A Rooker	
Debtor 2 (Spouse, if filing)	Valerie L Rooker	
United States Bankrup	cy Court for the: SOUTHERN DISTRICT OF OHIO	
Case number (If known) 2:1	5-bk-55786	Check if this is:
		 An amended filing A supplement showing postpetition chapter income as of the following date:
Official Form	<u>106I</u>	MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,		☐ Employed	☐ Employed
	attach a separate page with information about additional	Employment status	■ Not employed	■ Not employed
	employers.	Occupation	lost job	
	Include part-time, seasonal, or self-employed work.	Employer's name		
	Occupation may include student or homemaker, if it applies.	Employer's address		
		How long employed to	here?	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2.

3. Estimate and list monthly overtime pay.

3.

4. Calculate gross Income. Add line 2 + line 3.

				iling spouse
2.	\$	0.00	\$	0.00
3.	+\$	0.00	+\$_	0.00
4.	\$	0.00	\$_	0.00

For Debtor 1 For Debtor 2 or

Official Form 106I Schedule I: Your Income page 1

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Debtor 1 Debtor 2	Darryl A Rooker Valerie L Rooker	_	C	Case n	umber (<i>if k</i>	nown)	2:1	5-bk-55	786	
Co	py line 4 here	4.		For E	Debtor 1	0.00		or Debtor on-filing s		
				·			· -			
	t all payroll deductions:									
5a.	•	5a		\$		0.00	\$_		0.00	
5b.	·	5b		\$		0.00	\$_		0.00	
5c. 5d.	·	5c 5d		\$		0.00	\$_ \$		0.00	
5u. 5e.		5u 5e		\$ 		0.00 0.00	. Φ_ \$		0.00	
5f.	Domestic support obligations	5f.		\$ 		0.00	· \$-		0.00	
5g.	•	5g		\$		0.00	\$		0.00	
5h.		-).+	\$		0.00	+ \$		0.00	
6. Ad	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	 6.		\$		0.00	\$		0.00	
7. Ca	Iculate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$		0.00	\$		0.00	
8. Lis 8a. 8b. 8c. 8d. 8e. 8f.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8c 8d 8e 8e		\$ \$ \$ \$		0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -		0.00 0.00 0.00 0.00 0.00 0.00 0.00	
9. A d	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	9	\$		0.00	\$_		0.00	
		10.	\$_		0.00	+ \$		0.00	= \$	0.00
Ad	d the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L								
Inc oth Do	ate all other regular contributions to the expenses that you list in <i>Schedule</i> lude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not ecify:	depe					•			0.00
Wr	d the amount in the last column of line 10 to the amount in line 11. The resite that amount on the Summary of Schedules and Statistical Summary of Certablies							e. 12.	\$	0.00
13. Do	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?							Combined monthly in	

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E:III	in this informs	ation to identify w	211 2222			1		
FIII	in this informa	ation to identify yo	our case.					
Deb	otor 1	Darryl A Roo	oker			Ched	ck if this is:	
Deh	otor 2	Valerie L Ro	okor				An amended filing	wing postpetition chapter
	ouse, if filing)	valerie L Ro	OKEI				13 expenses as of	
Unit	ed States Bank	ruptcy Court for the	: SOUTH	IERN DISTRICT OF OHIO		-	MM / DD / YYYY	
Cas	e number 2:	:15-bk-55786						
(If k	nown)							
O	fficial Fo	orm 106J				ı		
		J: Your	Evnor	1808				12/15
Be info nur	as complete ormation. If m mber (if know	and accurate as	s possible eded, atta ry questio	. If two married people ar ich another sheet to this				or supplying correct
Par 1.	Is this a join		enoia					
	☐ No. Go to							
	Yes. Doe	es Debtor 2 live	in a separ	ate household?				
	■ N		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	tor 2.	
_				, , ,				
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						Yes
								□ No
					-			☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes
3.	expenses o	penses include of people other t d your depende	han ┌	No Yes				
Des				ly Evnances				
exp	imate your ex	a date after the	our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i>)			Your exp	enses
•		•						
4.		or home owners nd any rent for th		ses for your residence. In or lot.	nclude first mortgage	e 4. \$	·	560.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. \$;	0.00
		erty, homeowner's	s, or renter	's insurance		4b. \$		0.00
		·	•	upkeep expenses		4c. \$		0.00
5		eowner's associa			mo oquity loose	4d. \$ 5. \$		0.00
5.	Auditional	mortgage paym	ento lur yo	our residence, such as ho	me equity loans	D. 4	,	0.00

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ebtor 1	Darryl A Rooker	Caaa	hor (if known)	2:15-bk-55786
btor 2	Valerie L Rooker	case num	ber (if known)	2.13-DK-33100
Util	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	300.00
6b.	Water, sewer, garbage collection	6b.	\$	85.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	130.00
6d.	Other. Specify: Cable, Internet,home phone	6d.	\$	203.00
Foo	od and housekeeping supplies		\$	600.00
Chi	Idcare and children's education costs	8.	\$	0.00
Clo	thing, laundry, and dry cleaning	9.	\$	300.00
Per	sonal care products and services	10.	\$	100.00
Me	dical and dental expenses	11.	\$	200.00
	nsportation. Include gas, maintenance, bus or train fare.	40	Φ.	300.00
	not include car payments.	12.	\$	
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
	aritable contributions and religious donations	14.	\$	0.00
	urance. not include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	. Health insurance	15b.		0.00
	. Vehicle insurance	15c.	\$	108.00
	l. Other insurance. Specify:	15d.	·	0.00
	res. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	ecify:	16.	\$	0.00
	tallment or lease payments:			
	. Car payments for Vehicle 1	17a.	· <u> </u>	0.00
	. Car payments for Vehicle 2	17b.		0.00
	Other. Specify:	17c.	·	0.00
	l. Other. Specify:	17d.	\$	0.00
	ur payments of alimony, maintenance, and support that you did not report as	18.	\$	0.00
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Her payments you make to support others who do not live with you.	10.	\$	0.00
	ecify:	19.	<u> </u>	
	per real property expenses not included in lines 4 or 5 of this form or on Sche		our Income.	
	. Mortgages on other property	20a.		0.00
	. Real estate taxes	20b.	\$	0.00
20c	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	l. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	Homeowner's association or condominium dues	20e.	\$	0.00
Oth	er: Specify: cat food and litter	21.	+\$	40.00
	bacco Products		+\$	160.00
				100.00
	culate your monthly expenses			
	a. Add lines 4 through 21.		\$	3,186.00
	c. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
220	Add line 22a and 22b. The result is your monthly expenses.		\$	3,186.00
Cal	culate your monthly net income.			
	. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	0.00
	Copy your monthly expenses from line 22c above.	23b.		3,186.00
	177			3,133.00
230	Subtract your monthly expenses from your monthly income.			2 400 00
	The result is your monthly net income.	23c.	\$	-3,186.00
For	you expect an increase or decrease in your expenses within the year after yo example, do you expect to finish paying for your car loan within the year or do you expect your lification to the terms of your mortgage?			ease or decrease because of
I				
	No. Fxplain here:			
1 1	THE LEAVIGUE USES.			